



New Improved MRO Guidelines

Medicaid Rehab Option

- ◆ Must meet SPMI
- ◆ Must have functional deficits
- ◆ May have other diagnosis as secondary
- ◆ One Service definition for NMAP and NMMCP and the medically indigent
- ◆ Basic State plan (Chapter 35)

SPMI Required

- A severe and persistent mental illness
- Active psychiatric symptoms
- Has had one year or will have
- Results in functional deficits in two of three life skills areas.

Psychiatric Residential Rehab Admission Guidelines

- ◆ SPMI
- ◆ These deficits require 24 hour psychiatric residential setting
- ◆ The individual is at risk of institutionalization or living in a severely dysfunctional way, if PRR not provided

PRR Continued Stay Guidelines

- ◆ Meets Admit guidelines
- ◆ Does not require a higher LOC
- ◆ A lower LOC is not indicated
- ◆ Likelihood of benefit from service
- ◆ Is making progress

PRR Exclusion Guidelines

- ◆ Not SPMI
- ◆ Primary substance problem
- ◆ Primary developmental disability
- ◆ The individual is receiving ACT services

PRR Discharge

- ◆ Maximum benefit
- ◆ Sustainability plan in place
- ◆ Supports in place
- ◆ Crisis relapse plan in place
- ◆ Or the individual requests discharge

ACT Admission Guidelines

- ◆ SMPI
- ◆ Require 24 hour intervention capability
- ◆ Requires multidisciplinary team
- ◆ At risk for institutionalization
- ◆ History of high utilization (IP)
- ◆ Poor response to previous levels of treatment

ACT Exclusion

- ◆ Not SPMI
- ◆ Primary substance abuse or DD
- ◆ Does not have functional deficits in two or three areas
- ◆ Resides in a Nursing Home or PRR
- ◆ Needs a higher LOC

ACT Continuing Stay

- ◆ Meets Admission guidelines
- ◆ Does not require a higher LOC
- ◆ A less intensive LOC is not appropriate
- ◆ Reasonable likelihood of benefit
- ◆ Is making some progress in rehabilitation goals

ACT Discharge

- ◆ Maximum benefit achieved
- ◆ Can function without ACT
- ◆ Services are primarily monitoring
- ◆ Sustainability plan in place
- ◆ Supports in place
- ◆ Crisis Relapse plan in place
- ◆ Or, client requests discharge
- ◆ Or, client moves away
- ◆ Or, admitted to a higher LOC to exceed seven days

Community Support Admission Guidelines

- ◆ Meets SPMI
- ◆ Individual at significant risk of continuing a pattern of either institutionalization
- ◆ Or, living in a severely dysfunctional way

CS Exclusion Guidelines

- ◆ Not SPMI
- ◆ Primary Dx of Substance Use Disorder or Developmental Delay
- ◆ Does not have functional deficits
- ◆ Is in IP or PRR and not expected to discharge in 30 days
- ◆ Authorized for ACT
- ◆ Resides in a Nursing Home

CS Continuing Stay

- ◆ Meets admission guidelines
- ◆ Does not require higher LOC
- ◆ Can benefit from CS
- ◆ Making progress in rehabilitation goals

CS Discharge

- ◆ Maximum benefit
- ◆ Sustainability plan for supports in place
- ◆ Formal/informal supports in place
- ◆ Crisis relapse plan in place
- ◆ Or the individual requests discharge

Day Rehab Admission Guidelines

- ◆ Meets SPMI
- ◆ Functional Deficits require professional intervention in a day setting
- ◆ Individual at significant risk of continuing a pattern of either institutionalization
- ◆ Or, living in a severely dysfunctional way

DR Exclusion

- ◆ Not meeting SPMI guidelines
- ◆ Primary Dx of Substance or DD
- ◆ Does not have functional deficits
- ◆ Is in IP setting
- ◆ Authorized for ACT
- ◆ Resides in a Nursing Home

DR Continued Stay

- ◆ Meets admission guidelines
- ◆ Does not require higher LOC
- ◆ Can benefit from CS
- ◆ Making progress in rehabilitation goals

DR Discharge

- ◆ Maximum benefit
- ◆ Sustainability plan for supports in place
- ◆ Formal/informal supports in place
- ◆ Crisis relapse plan in place
- ◆ Or the individual requests discharge

Peer Review Points

- ◆ How (Workflow)
- ◆ Who (Panel)
- ◆ What (Criteria items of import)
- ◆ When (Time lines)

COMPARE PROCESSES

Medicaid

NBHS

CM Review

CM Review

Peer Review

ASO Physician
Review

Reconsideration

Chief Medical Officer &
Administrator Review

State Appeal

State Appeal

Getting an Authorization

Initial requests for MRO services are called in to the Magellan office.

Continuing stay requests are submitted on paper.

The Web and MRO

- ◆ Providers go to the Magellanprovider.com
- ◆ Login to NBHS website
- ◆ Fill out Registration form
- ◆ Select Pre-Auth as the treatment type
- ◆ Call 800-424-0333 or your Regional CM for an initial authorization

Getting Paid

- ◆ No letter is printed, providers go to our website and the Auth Report for auth numbers & dates of service.



The End

Questions / Answers